COLLEGE OF PHYSICIANS AND SURGEONS OF MANITOBA
1000 – 1661 PORTAGE AVENUE
WINNIPEG, MB R3J 3T7
TEL: (204) 774-4344 FAX: (204) 774-0750
E-MAIL: RAMregistraion@cpsm.mb.ca

OUTLINE OF EDUCATION, EMPLOYMENT, AND OTHER ACTIVITIES

In the format shown below, provide a detailed outline of all activities since commencing physician assistant school (employment, school, vacation, unemployment, moving, etc.).

DO NOT leave a gap of more than two weeks or you will be asked to provide information in writing for these time periods.

Please **DO NOT** enclose a copy of your CV with your application. This form **MUST** be completed as below**.**

Name & Mailing Address of Employer and/or Description of Activity (school, unemployed, travel, vacation, etc.)	Your Title	From (mm/dd/yyyy)	To (mm/dd/yyyy)

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